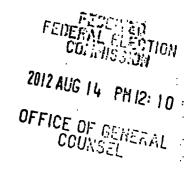
## LAW OFFICES OF **DEWAYNE ZINKIN**

5 RIVER PARK PLACE WEST, SUITE 203 FRESNO, CALIFORNIA 93720 Telephone: (559) 224-8100 Facsimile: (559) 224-8111



DEWAYNE ZINKIN ATTORNEY AT LAW

RICHARD L. FAIRBANK ASSOCIATE

August 7, 2012

Frankie D. Hampton
Paralegal Specialist
Federal Election Commission
Office of General Counsel, CELA Division
999 E Street, N. W.
Washington, DC 20463

Re: MUR 6606 – Attachments

Frankie.

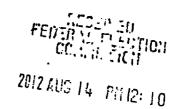
Please find enclosed the original, executed copies of the attachments emailed to you this morning, 8/7/12. If you require any more information, please don't hesitate to contact our office.

Kathy Copeland Zinkin Offices

cc:



### FEDERAL ELECTION COMMISSION 999 E Street, NW Washington, DC 20463



STATEMENT OF DESIGNATION OF COUNSELLS.

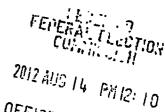
Please use one form for each Respondent/Entity/Treasurer.

FAX (202) 219-3923

Information is being sought as part of an investigation being conducted by the Federal Election Commission and the confidentiality provisions of 2 U.S.C. § 437g(a)(12)(A) apply. This section prohibits making public any investigation conducted by the Federal Election Commission without the express written consent of the person under investigation



### FEDERAL ELECTION COMMISSION 999 E Street, NW Washington, DC 20463



STATEMENT OF DESIGNATION OF COUNSEL

OFFICE OF COUNSEL

Please use one form for each Respondent/Entity/Treasurer COUNSEL

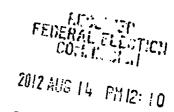
FAX (202) 219-3923

MUR# 6606
NAME OF COUNSEL: Bichard L. Fairbank
FIRM: Law Offices of Dewayne Zinkin
ADDRESS: 5 E. River Park Place West \$203
Fresna, CA 93720
TELEPHONE- OFFICE 539 224-8100
FAX (659 224-8111
The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.
7/3//2 Date Respondent/Agent -Signature Title(Treasurer/Candidate/Owner)
NAMED RESPONDENT: Zinkin Entertainment, LLC
MAILING ADDRESS: 5 3. River Park Place Letst #203 (Please Print)
Fresno, CA 93720
TELEPHONE- HOME ()
BUSINESS (659) 2248(CV)

Information is being sought as part of an investigation being conducted by the Federal Election Commission and the confidentiality provisions of 2 U.S.C. § 437g(a)(12)(A) apply. This section prohibits making public any investigation conducted by the Federal Election Commission without the express written consent of the person under investigation



### FEDERAL ELECTION COMMISSION 999 E Street, NW Washington, DC 20463

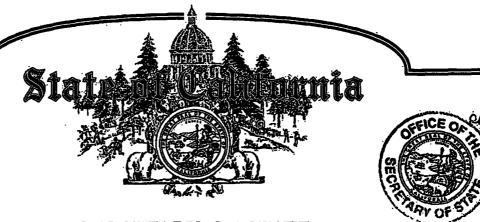


STATEMENT OF DESIGNATION OF COUNSEL COUNTY Please use one form for each Respondent/Entity/Treasurer

FAX (202) 219-3923

MUR# 6606
NAME OF COUNSEL: Richard L. Fairbank
FIRM: Law Offices of Dewoyne Zinkin
ADDRESS: 5 E. River Park Place West \$203
Fresna, CA 93720
TELEPHONE- OFFICE 539 224-8100
FAX (559 224-8111
The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.
7/3//2 Date Responder/Agent/Signature Title(Treasurer/Candidate/Owner)
NAMED RESPONDENT: De Wayne Zinkin
MAILING ADDRESS: 5 & River Park Place West, 203 (Please Print)
Fresno, CA 93720
TELEPHONE- HOME ()
BUSINESS (569) 224-8100

Information is being sought as part of an investigation being conducted by the Federal Election Commission and the confidentiality provisions of 2 U.S.C. § 437g(a)(12)(A) apply. This section prohibits making public any investigation conducted by the Federal Election Commission without the express written consent of the person under investigation



#### SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of \_\_\_\_ page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

DEC 3 1 2001

Billyones

Secretary of State

## **State of California**

### **Bill Jones**

**Secretary of State** 

# LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

A \$70.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

_0_0	<b>^</b>				
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File#.

ENDORSED - FILED in the office of the Secretary of State of California

DEC - 3 2001

BILL JONES, Secretary of State

This Space For Filing Use Only

1.	the state of the s	is "Limited Liability Company," "Ltd. Liabilit	y Co.,* or the abbreviations "LLC" or				
	"LLC.")ZINKIN ENTERTAINMENT LLC						
2.	. The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the Beverly-Killea limited liability company act.						
3.	Name the agent for service of process and check the appropria	ate provision below:					
l	DEWAYNE S. ZINKIN, JR.		which is				
	[ X ] an Individual residing in California. Proceed to item 4.						
	[ ] a corporation which has filed a certificate pursuant to s	ection 1505. Proceed to item 5.					
4.	If an individual, California address of the agent for service of pro Address: 2377 W. SHAW AVE., SUITE 112	Cess:					
	City: FRESNO State: CA		Zip Code: 93711				
5.	The limited liability company will be managed by: (check one) [ ] one manager [ ] more than one manager [ $\chi$ ] single members.	er limited liability company [ ] all limite	od liability company members				
6.		• • •	nade a part of this certificate.				
	Other matters may include the latest date on which the limited	liability company is to dissolve.					
7.	Number of pages attached, if any: NONE						
8.	Type of business of the limited liability company. (For information SPORTS AGENT	onal purposes only)					
9.	DECLARATION: It is hereby declared that I am the person who	executed this instrument, which execu	tion is my act and deed.				
		DEWAYNE S. ZINKIN JR.					
	Signature of Organizer  Type or Print Name of Organizer						
	and the						
	1/120/6/						
	Date /		SFICE OF				
10.	RETURN TO:						
	DEWAYNE S. ZINKIN JR.	1	OFF THE				
	NAME		2				
	FIRM 2377 W. SHAW AVE., SUITE 112 ADDRESS FRESNO CA		(A)				
	ADDRESS FRESNO, CA CITY/STATE   93711		TAY OF				
	ZIP CODE						
		<del></del>					
	SEC/STATE (REV. 12/99)		FORM LLC-1 - FILING FEE \$70.00 Approved By Secretary of State				

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File with:	Brandi L. FRESNO 2221 Kern FRESNO,	COUNTY CL Street	ERK			(Space B	Clow for Use by County Cleri	ED
	(559) 600-2					İ	MAR <b>06</b> .20	12
ļ	ITIOUS E	USINESS	NAME	STAT	EMENT		FRESNO COMATY	GLERKAC.
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<u> </u>		s): (Type or Prin	nt)				<del></del>	Phone (Optional)
Zinkin Entertair		,-y. (- <b>y p</b>	,					(0)
								559-224-8100
5 E. River P		st, Suite 203, I	-	•	Business (P.O. Box i 13720, Fresno Co	=	ic)	
	(11 611101							
2) Full Nam	e of Registrant	•			Residence Address	<del></del> -		Phone (Optional)
Zinkin Entertair	nment, LLC				5 E. River Park Pla 93720	ce West, Sui	ite 203, Fresno, California	559-224-8100
}								·
		·····	<del></del>		·	<del></del>	·	·
Fictitious	Business Name	transact business (s) listed above on		transact b	ant has not yet comm usiness under the Pic Name(s) listed above	titious	5) This business conduct Limited Liability Co.	
	12/31/2001 of Incorporat	ion		This State	ement has been execu	ıted	<del> </del>	· · · · · · · · · · · · · · · · · · ·
(If Appli	cable)			pursuant t	to section 17919 of th	ne Business		
200136410					ssionals code. (Do no no no unless box is che			
	rint Signature at		_	(Signed)	Mille			
Devvayne	5. Zinkin, iviai	naging Membe	r	"I declare	that all information in mation which he or sh	this stateme	ut is true and correct. (A reg false is guilty of a crime.)"	gistrant who declares as
THE FILING O	F THIS STATEME	NT DOES NOT OF	TSELF AUTH	ORIZE THE	USE IN THIS STATE O	FA FICTITIO	OUS BUSINESS NAME IN VIOL ND PROFESSIONS CODE)	ATION OF THE
		OUNTY CLERK					TATEMENT EXPIRES OF	<b>v</b> :
	RDANDI	L. ORTH , CO	NEINITE C	יו מומו זי			04/10/2017	
Vi.	otorio Li	Hicara		LEKK		A NEW S	TATEMENT MUST BE FII THE EXPIRATION DA	
(SEAL)	illicana.	County Clerk & do	Rikx	Spa	ce Below for Use of	County Cle	rk Only – Do Not Publish (	Certification
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### State of California Secretary of State

STATEMENT OF INFORMATION (Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

#### IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

Zinkin Entertainment LLC

ENDORSED - FILED In the office of the Secretary of State of the State of California

DEC 2 2 2011.

		This Space For Filing Use Only				
DUE DATE:						
FILE NUMBER AND STATE OR PLACE OF ORGANIZATION						
2. SECRETARY OF STATE FILE NUMBER	3. STATE OR PLACE OF ORGANI	ZATION				
200136410056	CA					
NO CHANGE STATEMENT						
If there has been no change in any of the information contained the box and proceed to item 13.	in the last Statement of Informa	tion filed with the Secretary of State, check				
If there have been any changes to the information contained in been previously filed, this form must be completed in its entirety.	the last Statement of Informatio	n filed, or no Statement of Information has				
COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate	e the name of the city. Items 4 and	d 5 cannot be P.O. Boxes.)				
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY AND STATE	ZIP CODE				
5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY)	CITY	STATE ZIP CODE				
NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE O	FFICER, IF ANY					
6. NAME ADDRESS	CITY AND STATE	ZIP CODE				
NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Allach addillonal pages, if necessary.)						
7. NAME ADDRESS	CITY AND STATE	ZIP CODE				
8. NAME ADDRESS	CITY AND STATE	ZIP CODE				
9. NAME ADDRESS	CITY AND STATE	ZIP CODE				
AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)  10. NAME OF AGENT FOR SERVICE OF PROCESS						
11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDI	VIDUAL CITY	STATE ZIP CODE  CA				
TYPE OF BUSINESS ·						
12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY						
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.	112					
DeWayne S. Zinkin	/// <del></del>	mber 1 <u>2/</u> 15/11				
TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM	SIGNATURE	TITLE DATE				
LLC-12R (REV 03/2007)		APPROVED BY SECRETARY OF STATE				